Effective October 1, 2001						196	,
CLAIMS A	(Column 1)	(Column 2)	SMAL TYPE	LENTITY	OR	OTHER	
TOTAL CLAIMS	30		RAT	E FEE]	RATE	FEE .
FOR	NUMBER FILED	NUMBER EXTRA	BASIC	FEE 370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS	EABLE CLAIMS 30 - minus 20=		X\$)=	OR	X\$18=	1800
NDEPENDENT CLAIMS	6_ minus 3 =	6_ minus 3 = 3		· =	OR	X84=	252,0
			+14)=	OR		2.10.10
• If the difference in column 1 is less than zero, enter "0" in column 2		TOT	AL	OR	TOTAL	1172	
46 HOLAMS AS	AMENDED - PAR	IT II Imn 2) (Column 3)		LL ENTITY	OR	OTHER SMALL	THAN
CLAIMS	HIG NUR PREVI	HEST HEER PRESENT HOUSLY EXTRA	RAT	ADDI- E TIONAL FEE		RATE	ADDI- TIONAL FEE
REMAINING AFTER AMENDMENT Total Independent •	Minus 3	Ö -	X\$!		OR	X\$18=	
Independent • (0	Minus ***	0	X42		OR	X84=	
FIRST PRESENTATION OF	MULTIPLE DEPENDEN	T CLAIM	+14	D=.	OR	+280=	
			ADDIT.	TAL	OR	TOTAL ADDIT FEE	
(Column 1	· (Colu	ımn 2) (Column 3)					
CLAIMS REMAINING	HIG NUI PREV	HEST MBER PRESENT 10USLY EXTRA	RAT	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AFTER AMENDMEN Total • 28 Independent •	Minus	30	XS		OR	X\$18=	
Independent •	Minus	6 -	X43	=	OR	X8 ∮ =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM)=.	OR	+280=	
			ADDIT.	YAL	OR	7070	
(Column 1	\ (Cot	.mn 2) (Column 3			-	70011.700	
CLAIMS REMAINING	HIG NUI PREV	MBER PRESENT MOUSLY EXTRA	RAT]	RATE	ADOI- TIONAL FEE
AFTER AMENOMEN Total • Independent •	Minus **	# .	XS !	FEE	OR	X\$18=	1
Independent .	Mirus ***	10	X42		1	X84=	
FIRST PRESENTATION OF	MULTIPLE DEPENDEN	IT CLAIM	J ├─		OR		
* If the untry in column 1 is less the	n the entry in column 2, wi	ite "0" in column 3.	+144	MAL	OR	+280= TOTAL	
** If the "Highest Number Previously ***If the "Highest Number Previously The "Highest Number Previously	Paid For IN THIS SPACE Paid For IN THIS SPACE	is less than 20, enter "20 E is less than 3, enter "3."	ADDIT.	FEE)OA	ADDIT, FEE	
FORM PTO-675 (Rev. 6/01)		Du a 020 tros 401-124/57027		Frademark Office, C			F COMMERI

Application or Docket Number